

**Application Data Sheet**

**Application Information**

**Application Type::** Regular  
**Subject Matter::** Utility  
**Suggested classification::**  
**Suggested Group Art Unit::**  
**CD-ROM or CD-R?::** None  
**Computer Readable Form (CRF)?::** No  
**Title::** PACKAGING SYSTEM FOR  
TRANSDERMAL DRUG DELIVERY  
SYSTEMS  
**Attorney Docket Number::** NOPH/120/JGK  
**Request for Early Publication?::** No  
**Request for Non-Publication?::** No  
**Suggested Drawing Figure::** 1  
**Total Drawing Sheets::** 2  
**Small Entity?::** Yes  
**Petition Included?::** No  
**Secrecy Order in Parent Appl.?::** No

**Applicant Information**

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** David P.  
**Family Name::** KANIOS  
**City of Residence::** Miami  
**State or Province of Residence::** Florida

123456789012345678  
**Country of Residence::** US  
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**State or Province of mailing address::** FL  
**Postal or Zip Code of mailing address::** 33157

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Juan A.  
**Family Name::** MANTELLE  
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**State or Province of Residence::** Florida  
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**State or Province of mailing address::** FL  
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**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Paul  
**Family Name::** JOHNSON  
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**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Chensheng  
**Family Name::** LI  
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**State or Province of Residence::** Florida  
**Country of Residence::** US  
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**City of mailing address::** Miami  
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**Postal or Zip Code of mailing address::** 33186

#### **Correspondence Information**

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**Representative Information**

<b>Representative Designation::</b>	<b>Registration Number::</b>	<b>Representative Name::</b>
Primary	43,727	JAY G. KOLMAN

**Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>
This Application	Non-Provisional of	60/285,976	04/23/01

**Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

**Assignee Information**

**Assignee name::** NOVEN PHARMACEUTICALS, INC.